Under the Paperwork Reduction Act of 1995, no persons are required	to respond to a collection of	f information unless it displays a val	id OMB control number.
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 11884/405701	
For METHOD AND SYSTEM FOR TESTING AN APPLICATION FRAMEWORK AND ASSOCIATED COMPONENTS			
Art Unit 2191 Examiner Ted T. Vo			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
∑ Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>450.00</u>
☐ Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
□ A check in the amount of the fee is enclosed. □ Payment by credit card. Form PTO-2038 is attached. □ The Director has already been authorized to charge fees in this application to a Deposit Account. □ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number: 11-0600.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the			
☑ attorney or agent of record. Registration Number: <u>54,204</u>			
☐ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
/Jeffrey R. Joseph/ September 13, 2007			3, 2007
Signature	·		
Jeffrey R. Joseph		(408) 975-7500	
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if			
more than one signature is required, see below.			
☐ Total of 1 forms are submitted.			

This collection of information is required by 3T CFR 1.136(s). The information is required to obtain or retain a benefit by the pable which is only indirectly and STR 1.136(s) and a registration of the pable which is onliced by the STR 1.05 (s) and 3T CFR 1.13 and 1.14 This collection is settimated to laste 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO Time will your depending upon the individual case. Any comments not be amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A.22313-1450. DN ON ST SEND PESS OR COMPLETEDFORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA.22313-1450. If you need assistance in completing the form, call 1-260-977-0-1919 and select option 2.